

THE

MEDICAL MISSIONARY



September-October 1948

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No. 5

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Our Contributor:

Reverend John A. Morrison, S.J. went as a missionary to India while still a scholastic. He was ordained in Patna, and has worked near there ever since. He is a good friend of our Sisters at Holy Family Hospital, Patna.

Your Will:

can help the Medical Mission Sisters bring health and healing to the sick in mission lands. The following approved form of bequest may be used:

"I hereby give (devise) and bequeath to the Society of Catholic Medical Missionaries Inc. (also known as the Medical Mission Sisters), an institution incorporated under the laws of the State of Maryland, and its successors forever the sum of \$.....
for its general purposes."

Our Cover This Month:

Sister M. Paula D'Errico, of Franklin, Mass., poses with Ahmed and Nicholas the day after the midnight adventure with thieves. They insisted on dressing up in their Sunday best for the picture. Read the story in Sister Raphael's "Watchman, What of the Night?" on page 72.

THE MEDICAL MISSIONARY

8400 Pine Road

Sister M. Christine, S.C.M.M., Editor
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THE MEDICAL MISSION SISTERS

Who they are:

The Medical Mission Sisters are a religious community devoted to the care of the sick in the missions. Some of the Sisters are doctors, nurses or pharmacists; others are engaged in secretarial, household and similar duties necessary for medical mission work.

Main Activities

Hospitals, dispensaries, home visiting, leprosaria, training native nurses, training native compounders, maternity and child welfare clinics, establishing native Medical Mission Sisterhoods.

To cope with the numerous requests from mission bishops for medical mission centers, many vocations are needed.

Houses of the Society

Motherhouse and Novitiate — 8400 Pine Road, Fox Chase, Philadelphia 11, Pa.

House of Studies—6th & Buchanan Sts., Washington 17, D. C.

Postulate; Osterley, Middx. England
Heerlen, Holland

Missions

PAKISTAN

Holy Family Hospital—Rawalpindi
Holy Family Hospital—Karachi
Holy Family Hospital —
Mymensingh

INDIA

Holy Family Hospital—Patna
Holy Family Hospital—Mandar

INDONESIA

Maternity Clinic, Stella Maris Hospital, Makassar, Celebes

AFRICA

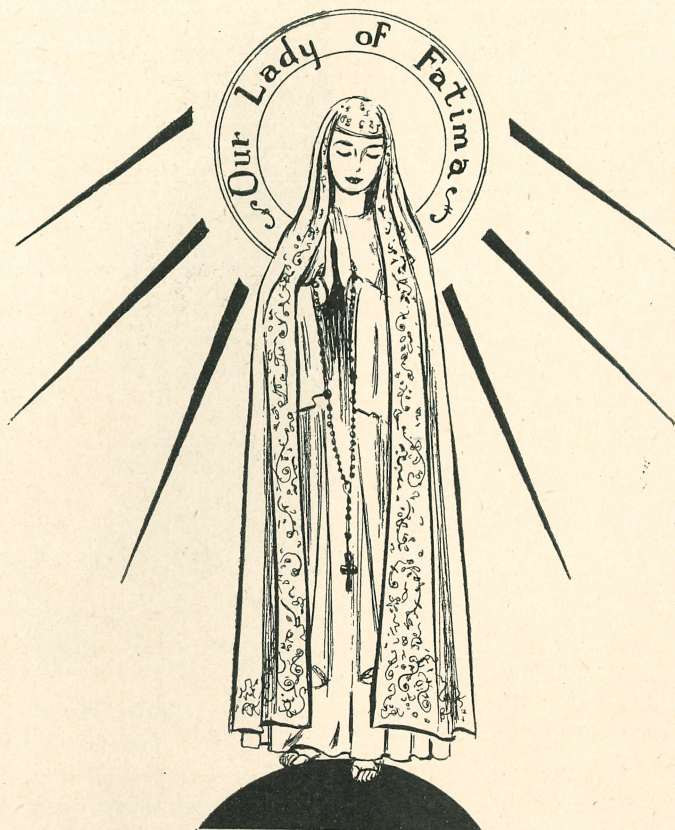
Holy Family Dispensary —
Berekum, Gold Coast

UNITED STATES

Catholic Maternity Institute
Santa Fe, New Mexico
The Catholic Colored Clinic
Atlanta, Georgia

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The problem of a lasting and enduring peace is a problem of the whole world, and of the missionary world as well. The toll taken in lives and property in the missions during the recent war has done almost irreparable harm.

It is with profound concern that we read the statement of Rt. Rev. William C. McGrath of Toronto, who said, "Unless we follow the Peace Plan of Mary given by Our Lady at Fatima, we are heading straight into the jaws of an atomic war,—a war that well may wipe out our civilization."

For 740 years, ever since Our Lady appeared to St. Dominic in the chapel at Prouille, the Rosary has been an instrument of peace, with the power of the atom bomb, and none of its destructiveness. When an army of 700 soldiers defeats an enemy of 43,000, there must be some other explanation than mere force of numbers. That is what happened in 1213, when the Christians under Simon de Montfort routed the Albigensian heretics. It was the first victory of the Rosary.

At the famous battle of Lepanto in 1571, the fleet of Don John crushed the naval power of the Turks. Once again, the Rosary was the greater weapon than earthly power. Pope Pius V instituted the Feast of October 7 in thanksgiving.

At Fatima, Our Lady once again has given to us her Plan for Peace—prayer, especially the Rosary, and penance. She has promised us, "If my requests are granted, Russia will be converted, and there will be peace." She will not fail us—we can have peace if . . . we pray!

It's Cholera!

by Reverend John A. Morrison, S. J.

Cholera in epidemic form is an all too frequent visitor in Patna Mission. This year the disease was prevalent all around my mission of Tinkonua. When weeks passed with no cases in our village I began to hope that we might be spared. Then one Sunday after Mass I received an urgent call to a Santal woman who was apparently dying in Darkora, only two miles away. Cholera was coming closer.

A few days later old Dhano, a pagan Santal whose house is just across the fields from the mission station came to see me.

"Father, please come and examine my child—he had been sick since early this morning."

"I can't go just now, Dhano," I replied, "give him this medicine and if he doesn't get better, I'll drop over later."

But Dhano wasn't satisfied, and he finally came out with the whole truth, that he dreaded admitting, even to himself. "Please come yourself, Father, quickly,—it's Cholera!"

That put an entirely different aspect on the case and taking my medicines I hurried over. Cholera had struck close, and I feared lest it spread.

Cholera is a terrible disease, swift and merciless to kill, and highly contagious. Only a few hours after he is attacked a man who was previously strong and healthy has a look of death about him, with hollow cheeks and sunken, staring eyes. It is not unusual for cholera to carry off a patient in half a day.

When I reached Dhano's house I found eight-year-old Kanhai tossing restlessly on a rope bed, his mother sitting at his side. Packed in the same small, windowless, one room mud and thatch house were all his brothers and married sisters, their babies crawling around on the mud floor near his bed. Kanhai should have been segregated, but I knew from experience the uselessness of even suggesting it. I did what I could, giving him medicine and the rest of the



Cholera claims about 147,000 victims yearly in India.

family a prophylactic. Telling the father to keep me informed, I left.

Kanhai's elder brother soon returned to call me. "Please Father, come again and baptize him. He is very sick." Old Dhano, a dyed-in-the-wool pagan had really been impressed by what I had often told him.

The boy slowly improved and then, early next morning, Bajnath, Dhano's neighbor was at my door. "Father, come quickly! Bhaiya is very sick. It's cholera!" The disease was spreading, and it seemed that we were in for an epidemic. I did what I could for Bhaiya, a fine boy of thirteen years and Bajnath's eldest son, but that afternoon he died, only twelve hours after having been attacked.

At 11:30 that night I was awakened by a commotion among the school boys in their house only a few yards from my own. Soon one of them was at my bedside. "Father, come quickly! Buddhu is very sick!" We were in for it indeed.

At earliest dawn I sent all my boarders back to their villages. Since mission is still in the infant stage, my only accommodations are small thatched houses in which we

are badly crowded. It was impossible to carry on school with cholera in our midst.

The disease was striking—now here, now there. The usual carefree cheerfulness of the Santals was exchanged for gloom and apprehension. In our village alone, 40 were attacked and 12 died. I was able to save most of those whom I could treat properly.

But this epidemic gave the whole village of Tinkonua a jolt in the right direction such as it had never received before. I now have the confidence of a number who before were stand-offish and suspicious. And I wished for the hundredth time that the Medical Mission Sisters, or at least qualified nurses trained by them, were at hand to care for my medical work properly. Even under ordinary circumstances running a mission station alone—what with keeping an eye on the school, visiting villages and carrying on the routine work—is a good deal like playing a one-man orchestra. It so happened that I had the extra work of putting up a much needed chapel, and making frantic efforts in the face of black market prices to obtain almost unobtainable materials to finish the work before the monsoon rains arrived. When cholera

hit and most of my time was taken up with the sick, I felt as though my hat had blown off.

When Our Lord walked the earth, He went about the villages of His native land doing good. Men flocked to Him in thousands because he healed their sick. And certain women also followed Him. Noble hearted women follow Him today in mission lands, aiding the priest in the vast work of charity for Christ's poor.

In India, where health conditions are so tragic, no mission station is complete until it has a well-equipped dispensary in competent hands. During this last cholera epidemic I thought of Holy Family Hospital at Patna, the hub of the mission, and I dreamed of the day when sufficient vocations would enable them to handle all the work in Patna Missions, not only with hospitals, but with trained workers in dispensaries at our numerous mission stations. But until that dream comes true much water will flow down the Ganges, and many vocations will have to come forward, generous young women to follow Christ through India's villages and countryside.

LOTS FOR LITTLE SHOP

By collecting old clothes, furniture, books, etc., and selling them under the thrift shop plan, LOTS FOR LITTLE has been able to give financial aid to no less than six charitable organizations, including our own medical missions in India. To carry on this work, however, the promoters of the shop depend on you for voluntary donations.

We ask you and all our friends, therefore, to help this cause by salvaging old clothes, books, bric-a-brac, novelties, anything you no longer need or want for LOTS FOR LITTLE. Very little effort is required on your part. Merely collect your rummage and send it to 902 Third Ave., New York City, or, if you live in New York, phone Plaza 3-1850.

You will be doing a good work—you will be "salvaging for Christ."

MISSION INTENTIONS



During September the Holy Father asks us to pray "For the defense of Catholic Schools in India."

The primary purpose of mission work is the establishment of the visible Church in lands where she is not. Spiritual and corporal works of mercy are very much a part of the visible Church. Thus it is that in mission lands, the founding of schools, orphanages, cooperatives and hospitals are so important. The advantages of a mission school are manifold. It attracts prospective converts, dissipates prejudice against the Church; it instructs and forms the neophytes to the doctrines of the Church.

However, it is essential that the mission school be free from unwarranted interference from the government if it is to attain these results. The experience of missionaries in the past in India prove what a thorny problem this matter of freedom of the schools can be. For instance, within recent years, the Travancore trouble, the Goa Conversion Case, and the fracas over Sophia College have harassed the missionaries. Since India is at the beginning of a new era, it is with good reason that the Holy Father asks us to pray during September "for the defense of Catholic schools in India."

With firm hope for the future we read in the new Constitution of the Dominion of India, "Minorities will further have the right to practice and propagate religions, to establish and administer educational institutions of their choice . . ."

TRAINING MIDWIVES AT MAKASSAR

Sister M. Francesca, S. C. M. M.

Fifteen years after their foundation, the Medical Mission Sisters opened a house at Heerlen (Holland) in 1939. Prior to this, Dutch candidates made their postulate and novitiate either in the United States entirely, or in England and the United States combined. The Society at that time had charge of three hospitals in India. A new foundation in Africa was next on its program. At the Motherhouse in Philadelphia, there were requests from more than fifty missionary bishops asking the Sisters to take up medical work in the territories un-

der their jurisdiction. In comparison to the health conditions in India, China, and the greater part of Africa, those existing in Indonesia were fairly favorable. Had not the social-hygienic division of the League of Nations during its International Congress at Bandoeng in 1938 publicly expressed its admiration for the work carried out by the Indonesian government in the field of public health! For the near future, conditions seemed to direct activities towards those regions where the needs were greater.

During the war in the Orient, however, a

number of factors combined to make even Indonesia an "emergency case." In the first place, the untimely loss of mission personnel called for replacement by members of other congregations. Since it was the desire of the native population to become self-sufficient, it was expedient to obtain personnel capable of training the natives in every art, profession and science.

Several requests had been received from missionary superiors in Indonesia, begging for Sisters. The Dutch Pro-vice of the Medical Sisters became convinced that, both as women of the Netherlands and as missionary Sisters, a great task awaited them in Indonesia. They asked the Motherhouse for permission to direct their attention and activities in the near future especially to Indonesia. The permission was granted. On March 7, 1947, five Medical Mission Sisters left "Imstenrade," their house at Heerlen, for Batavia. Two of their number were nurse-midwives, one a nurse, another a social worker, and the fifth, an indispensable housekeeper. For two months they became acclimatized to work in the tropics at the Carolus Hospital of Batavia. Then they set out for Makassar, capital of the East Indonesian Republic, where twelve native girls, selected by Dr. Omen, the physician in charge of the "Stella Maris" Hospital, were ready to begin their midwifery training.

Midwives are greatly in demand in Indonesia, but opportunities for training them are all too few. Almost everywhere in the **kampung** (native village), the totally untrained **doekoen** is still active. In many respects she resembles her colleague in India, the **dhai**, a frequent cause of suffering in spite of her good intentions. In many instances, untrained workers have to be entrusted with important positions on far away islands because adequately trained personnel is not available. A knowledge of these facts makes one realize that the praise expressed by the League of Nations at Ban-

doeng does not imply that there is no more work to be done.

At that time of the opening of the School of Midwifery at Makassar, the Medical Missions Sisters were not able to send one of their own Sister-doctors. Dr. Anna Ongkihong, who had trained midwives for several years at Batavia, was entrusted with the medical direction of the school. The Sisters of J.M.J. who own "Stella Maris" the greatest mission hospital in the Indonesian Archipelago have put the obstetrical wards at the disposal of our Sisters. This hospital is located in the European section of the city. A second building, in the Indonesian quarter, consists of a Chinese home fixed up as a maternity clinic in 1935 under the auspices of the St. Melania work. The clinic has 25 beds. In each of the two divisions a Medical Mission Sister who is a nurse-midwife takes charge of the work and of the students. Each of these nurse-midwives in turn has a native midwife to assist her. Theoretical and practical instructions are given by Dr. Onkihong and Sister Thecla, the nurse-midwife in charge.

Mission Intention for October: "For the Catholic Missions in Indonesia. In Indonesia today, there are 500,000 Catholics, 565 priests, more than 500 brothers, and 1700 nuns, but only 16 native priests."

Always and everywhere we will have to continue to search for the **best methods** and the **most excellent means** for truly benefiting these people who in all good faith desire to learn from us. This calls for understanding and love, at times perhaps even for heroic self-sacrifice. Our task is one of **directing**, not of dominating, of **aiding**, not of intruding, of **serving** with the understanding that the orders given flow only from a correct understanding of interests of others and from a sincere desire to contribute towards the happiness of God's rational creatures. To us belongs the task of training good midwives, competent professionals, possessed of a strong sense of responsibility towards their people and filled with ambition to cooperate in the construction of a native society.

Adapted from: MEDISCH MISSIE MAANABLAAD Vol. 14, No. 7 Feb. 1948, pp. 113-116

The word *watchman* has an interesting connotation. Not so much the modern watchman who guards the factory or warehouse, armed with flashlight and police whistle, but those medieval guardians of the walled cities, or those of colonial days who patrolled the cobbled streets with their "All's well" reassuring the town. The watchmen of Africa are different from those of former days, but equally picturesque with their bows and poison-tipped arrows.

Thieving at night is a highly specialized art in Africa. Therefore, most institutions have night watchmen. Those who have not, bar their doors heavily at night.

It was one of our first nights in Kumasi, a typical night in the tropics, very dark until the moon rose, although the sky was filled with stars. The **night** started off as soon as we tucked in our mosquito nets and settled down to sleep. An animal began to howl below our windows, a jackal-like howl. We didn't like it. An owl perched on the veranda railing and *whoo-oo-ed*. We didn't like that either. Between the howling and the *whoo-oo-ing*, bats flapped against the shutters. Oh, well, eventually these little noises of the night will be as familiar as the sounds of crickets and bullfrogs.

But, about 11:00 p.m., we heard someone walking around downstairs, and doors moving. Probably the watchman. We dozed again, and about 1:00 a.m., Sister Paula called me. The person was still downstairs. It sounded as if he were in the classroom where our boxes were stored—those 38 precious boxes of drugs and supplies that we had worried about all the way across the Atlantic. The noise had been going on for two hours now, and it is a known fact that Watchman never stays awake for such a long period of time. We decided to call loudly for the watchman, for he should be sleeping nearby. His little house is between the convent and the school-building we occupied. Soon we heard the patter of barefeet on the steps, and watchman appeared out of the shadows into the patch of bright moonlight on the verandah, an awesome sight indeed.

"Watchman, Wh

Sister M. Raphael

We had been formally introduced to Ahmed—Watchman's name—that morning. He is a worthy Moslem from Northern territories. He didn't speak a word of English, but had gone down on his knees, his forehead touching the ground and had welcomed us solemnly. But at night, Watchman was a different person. Wearing only tattered shorts, carrying a bow and a quiver of arrows, with a huge combination club-and-pick-ax over his shoulder, he could be either thief or watchman. But if we were startled, he was terrified, shaking visibly. Not only were his services seldom called for, but I am sure we looked like spirits to him with our white habits and veils.

"Nicholas, Watchman, get Nicholas" and off he ran shouting loudly for Nicholas, his fellow-worker. Even in the sunlight, Nicholas is impressive—long tribal scars run over his cheeks and frame either side of his face, visible even through his clipped fringe of beard. We managed to get the idea of **thief** across to Nicholas, whose knowledge of English is scanty. He and Watchman inspected the premises, stamping about the verandah, pounding on the shutters and shaking the doors of the classrooms. The noise was enough to rouse all the spirits of Ashanti, much less scare the prowler, who had probably taken to his heels with our first summons of Watchman.

The two men returned, Nicholas assuring us that all was well. One of the classroom doors was unlocked, but nothing was disturbed. He pointed to the bow and arrow which he carried, then took in the school compound with a sweep of his arm. We understood that they had everything under control. Off they went triumphantly, and

at of the Night?"

, S. C. M. M., Ph. G.



Ahmed and Nicholas show Sister M. Paula just what would have happened to that prowler, if he had been found.

we retired, hoping that Watchman was sufficiently aroused to stay awake the rest of the night.

There are many Northern Territory men employed in the Gold Coast. They are a primitive people and are considered very dependable and faithful as workers. And if faithfulness is their great virtue, Nicholas and Watchman possess it in a high degree. In fact, they are lords of the compound; the Sisters are the strangers. The two men have little one-room houses close together, share the same open air fires for cooking chop and really get along very well. Nicholas acts as interpreter for Watchman whenever neces-

sary. However, Watchman's lack of English is to his advantage. His duties are not too clearly defined and therefore not easily questioned. He patrols (?) at night and keeps custody of the garden tools.

If Ahmed's duties are not clearly defined, Nicholas' are even more vague. He used to do the morning shopping. But, as the few purchases took him until noontime, the position of honor was given to the cook. Gone are the days where he proudly rode the mission bicycle around the market. There doesn't seem to be much else in life that Nicholas has any taste for.

Nicholas is officially the gardener, but the word must have a different import in Africa than it does back home. Whenever he is asked to do anything about the garden, the response is always, "It no be my work," and of course, one does not ask a man like Nicholas just exactly *what* he thinks his work is. Once, when Sister asked him to climb a ladder and cut some flowers, and received the usual answer, she assured him, "It no be my work either." Nicholas cut the flowers. He always does the work in the end, but only after giving the impression that he is doing a big favor.

Nicholas picked up many of his achievements at the *Free College*. That is what the inmates call the local prison, probably because they are taught trades there. Nicholas had a lifetime scholarship to the *free college*, his qualifications being housebreaking and grand larceny. But after one of the Mission Fathers converted him to Christianity, Nicholas became such a shining example of virtue that his life sentence was suspended, and he was bequeathed to the convent as chief (and only) gardener. His life is exemplary now. He attends Mass each morning and is a daily Communicant.

Despite his reluctance to function as anything other than lord-of-the-manor, Nicholas will not be discharged. There is no reason to hope that the next gardener would be anything better, and Nicholas can be trusted. Besides, he gives such local color to the compound.



Saint René Goupil

- Doctor
- Missionary
- Martyr

René Goupil was born in 1607 at Angers, France. In his youth he ardently desired to enter the Novitiate of the Jesuits at Paris. He remained there some months, but his poor health prevented him from consecrating himself to God in holy religion. During his stay at Paris, he met Isaac Jogues. As it was not God's will that he serve Him as a priest, he turned to surgery as a career and had some success in France. But he always longed to be a Jesuit, or to serve God through caring for the bodies in some spiritual capacity.

When the class of *donnés** was added to the Society, René volunteered in 1642 for the newly established Huron mission. For two years he had already labored tirelessly in the hospitals at Quebec and Sillery, ministering to the French and natives. He was humble enough to perform the most menial tasks, charitable beyond words, and zealous without bonds. Always affable, good-humored, frank, generous, and pure-minded as an angel, he won the affections of everyone by his gentleness, piety and kindness. When he was chosen to accompany Father Jogues to the Hurons, his heart almost burst with joy.

There was a cross to be won! Some of its glory must already have forecast its shadow on the soul of the young surgeon. He chose this narrow path knowing that the red robe

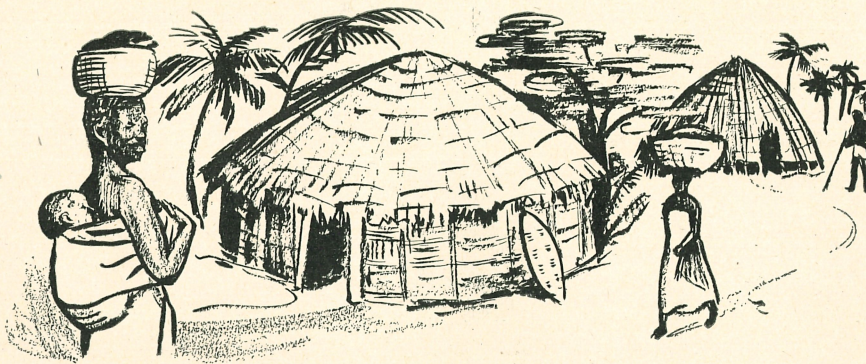
of martyrdom would more likely be his lot than the much coveted "Blackrobe" of his younger years. But on the way to torture and death his wish to consecrate his life to God in the Society of Jesus was fulfilled. Father Jogues received his vows of Temporal Coadjutor in the name of the Society amidst the Mohawk savages, their captors. It was the last great consolation before he was tortured. So mutilated was he in his features, so scarred in his body that even his torturers were disgusted with their own handiwork. "There was no beauty in him, nor comeliness." (Isaias 53-2)

His gentleness and simplicity won for him the friendship of the children of the Mohawks. His apostolic heart was eager to trace the glorious sign of the Holy Cross on their foreheads. Even his captors experienced his surgical ministrations. Thus, he went about doing good. One of his kind acts led directly to his martyrdom, six weeks after his arrival in Ossernenon. Hostile eyes had witnessed that Sign of the Cross traced on a child's forehead and breast. It was the hatred of the "Sign of Salvation" which caused René's death. He fell from the blows of an axe, murmuring the name of Jesus. This martyr of the Cross gave his life on September 29, 1642. He was canonized in 1930 with the other North American Martyrs.

Saint René Goupil, doctor and missionary, is an example for the medical missionary who spends herself in the service of the body to win souls for Christ.

M. R.

* a *donné* bound himself by contract or private vow for life to serve and assist the Fathers of the Society for the salvation or conversion of souls.



GOLD COAST NEWS

Since arriving at this little corner of the Lord's vineyard, we haven't had much quiet here. I wish I had words to describe the reception given us on our arrival. The scene was like a Cecil B. deMille movie set. Only a technicolor movie camera could have done justice to it. At the entrance to the village, a banner spanned the road, "WELCOME TO BEREKUM," and all the natives were there to greet us. The band led the procession—several horns and a couple of drums. The Christians marched on either side of us, singing hymns in their native dialect. Two perfectly huge umbrellas, at least eight feet in diameter, were sent by the chief, and we walked beneath them. Bishop Paulissen, Rev. Fathers Maessen, Gyselaars, Bouchier and the District Commissioner accompanied us. The Berekumhene (the chief) followed in his car. When we arrived at the Catholic Church, we gave thanks to God for our safe arrival. Then we went in procession to see our convent and dispensary which is a few minutes walk down the road.

The large plot of ground was once dense bush, but the villagers have cleared it. A row of neem trees has been planted along the road and the ground in front of the house has been laid out for a garden, and around the house borders of hedge and flowers, all neatly weeded and cared for. Each week a group of Christians from the villages of Berekum came and spent several hours a day working on the grounds. Every Friday morning the little school children have tended the garden plots, their special assignment. We truly felt that the natives of the

state have shared in the work of starting this mission. It is *home* from the very beginning.

We have not yet had the official opening of the dispensary. But nonetheless the patients come—emergency cases. A wall fell on some women and children, who were bruised and badly shaken. A laborer from the mission was brought this afternoon by the headmaster of the school. A beam had fallen on his head, giving a deep gash. Sister cleaned the wound, shaved the area, put in sulfa powder, took two stitches, and bandaged it. The headmaster watched the procedure attentively, and when it was finished, commented, "Sister-nurse-barber-tailor."

This is the rainy season, and supposed to be the coolest and nicest time of the year in the Colony. It usually rains in the late afternoon or early evening. And how it rains. It just comes down in torrents. But the ground seems to soak it all up. You can almost see the grass and shrubs grow. Someone said that a pencil stuck in the ground will soon sprout leaves—and I am beginning to believe that it is so.

Henry, age 19, is our cook. Henry is willing, but not sympathetic with suggestions of cooking differing from his set ideas of how Europeans should eat. If he had his way, we would eat custard for dinner and supper, seven days of the week. Sister Paula tried to make pie crust today with palm oil for shortening. It wasn't too bad if we could just forget how pie crust used to taste, and view it as an African creation.

Sisters Margaret Mary, Raphael and Paula.

At Home and Abroad

PHILADELPHIA

Reception and Profession

Three Sisters made final vows, six novices made first profession and twelve postulants received the habit at the ceremony on August 15. The Rt. Rev. Msgr. Thomas F. McNally, presided at the ceremonies and celebrated the Mass. He was assisted by the Reverend Charles J. Mahoney, C.S.C., chaplain at the Motherhouse. Reverend Dominic Unger, O.F.M. Cap., of the Capuchin College in Washington, who conducted the retreat, gave the sermon. Reverend Henry W. Greer, S. J., and Reverend Henry T. McFall were also present.

Sister M. Francis Webster, M.D., of Chicago, and Sister M. Dennis Houtman of Rotterdam, Holland, made their final profession of vows at the Motherhouse. Sister M. Paula D'Errico, of Franklin, Mass., made her final vows at Holy Family Dispensary, Berekum, Gold Coast.

The six novices who pronounced their first vows were: Sister M. Samuel Freeman, of Willows, Cal.; Sister M. Roberta Euper, Fort Smith, Ark.; Sister M. Dorothy Canary, Roanoke, Va.; Sister M. Raymond Baker, Brooklyn; Sister M. Virginia Sayers, Toledo O.; and Sister M. Gregory Gates, Hamburg, N. Y.

The following postulants received the habit of the Medical Mission Sister and their names in religion:

Dr. Ana Mota, M.D., Belo Horizonte, Brazil, in religion, Sister Maria Praxedes; Miss Afra Ferreira, Belo Horizonte, Brazil, Sister Mary Pia; Miss Marie P. Billette, Montreal, Canada, Sister Marie Joanna; Miss Miriam Hoover, R. N., Louisville, O., Sister Mary Miriam; Miss Joan Pritchard, Rio di Janeiro, Brazil, Sister Mary Victoria; Miss Francisca Aranda, Manilla, P. I., Sister Mary Felicitas; Miss Julia Burkart, New Orleans, La., Sister Mary Julia; Miss Patricia Edelen, Baltimore, Md., Sister Mary Joseph; Miss Carol Bilsborough, Escondido, Cal., Sister Marie Bernarda; Miss Angela

Barbara, Washington, D. C., Sister Mary Angela; Miss Alice Stover, Portland, Me., Sister Mary Euphrasia; and Miss Genevieve Murray, Philadelphia, Sister Mary Emmanuel.

Conventions

The summer at the Motherhouse was a busy one, as always. The Mission Exhibit at St. John's Seminary, Brighton, Mass., kept a lot of Medical Mission Sisters traveling northward. Sisters M. Laetitia, Angelica, Frederic, Gemma, Aloyse and Charles all took turns at watching the Medical Mission Booth. Forty-seven different communities of Sisters were represented at this Exhibit.

At the Crusade Convention, Notre Dame, Ind., August 26-29, the Sisters had the pleasure of meeting Father Michael J. Mathis, C.S.C., who aided Mother Dengel in the founding of the community. Sisters M. Laetitia, Benedict, David and Andrew attended the convention.

* * *

The most Reverend Leo P. Kierkels, who has lived for 17 years in India, has been elevated to the rank of Papal Internuncio to India. He will reside in Delhi.

The Reverend Nicolaus Schneiders, I.H.M., a native of Hoorn, Holland, has been appointed Vicar Apostolic of Makassar.

RAWALPINDI

Holy Family Hospital
Rawalpindi, Pakistan

The month started off well with a retreat in Murree by Father Finbar McCabe, a Capuchin from Lahore. Fortunately, the Mary Giri Sisters were able to take over the Nursing care and supervision at the hospital. It was amazing to those of us who had never visited Murree to feel the rapid change of temperature. The 7,000 foot climb takes two hours by car, and about half way up, a definite cool strata of air greets one.

To top off the month, we had a Capping Ceremony. Two probationer nurses and

three Nurse Dhais received their caps. It was all quite solemn; there were no faux pas. The nurses marched up the aisle with lighted candles, and sang the School Song. The President of the Student Government then explained the meaning of the nurse's cap and of the ceremony. Following this, they recited the Nightingale Pledge, and Dr. deSouza, our lay doctor, made the presentation of caps. As a finale, the nurses sang a hymn to Christ the King.

The monsoon started on July 15, like the strike of a clock. Water had begun to run low, so we were happy that it was not delayed. It is a terrible situation not to have water. Normal odors are bad enough, but when water is lacking, they increase and multiply. It rains about every other day—the temperature is only 85 degrees, but quite humid. The only trouble is, the weak spots in the roof show up. They say that when the rains get heavy, one has to use an umbrella inside the house as well as out!

The refugee situation has taken on a different aspect lately. The border has quieted down considerably, but war in Kashmir continues. Thousands of people are left homeless, or have been forced to leave because of excessive warfare. The number has become so great that the government has been forced to set up camps again as shelters. The people are not starving as they were last year, but desperately in need of medical care.

WELL AGAIN!

Just to keep you informed on the water situation at the new hospital—we must tell you that the third well was doing beautifully—until it hit the level of 60 feet. At that point, they met a strata of very hard clay which could not be penetrated by their methods—all they have are picks and shovels. It is producing some water, and that with what is coming from the second is enough for the present. If it won't be enough for the whole hospital, we will have to start the fourth well.

Sister M. Clare

VACATION IN THE MOUNTAINS

Loyola Villa
Darjeeling

India is really a land of contrast. As you stand on the summit and behold one of God's most sublime masterpieces, Mt. Kinchinjunga, you wonder if God in His goodness willed that these beautiful mountains were to fall to India to counterbalance the ugliness of demon worship. Even here in all this grandeur, devil worship is common. Two and a half miles from here we have the famous Goom Monastery, The monks hail from Tibet, the land of hermits or the closed land of mysteries—the monks are more commonly known as Lamas. They profess Buddhism, yet demon worship plays a very important role in their lives. One can easily

The newly professed on August 15 at the Motherhouse. Left to right: Sisters M. Dorothy, Samuel, Virginia, Roberta, Gregory and Raymond.



recognize them by their shaggy garments which they rarely change or wash. Their main work seems to be to go to the homes when people die. They stay with the body all night beating drums, ringing bells and blowing horns, and chanting prayers. The noise is to scare away the devils so that the soul will not be molested on its way to eternity.

Most, or at least 50% of the people here are Nepalese. There are 10 different languages spoken. The Lepchas are people who worship the snow, the forest, the rivers. Their religion seems to have originated from their appreciation of the majestic and sublime grandeur of the natural scenery which surrounds them. Another thing you find up here which you do not see in the plains are the prayer flags. There may be anywhere from six to a dozen around each hut. The poles are 15 or 21 feet high and a piece of cloth two feet wide reaching from the top of the pole down to 3 feet from the ground. As long as the flag moves in the breeze, their prayer is being heard. After a number of years it is flapped into shreds, but not until the last shred is blown away in the breeze is their prayer answered.

Sister M. Xavier

KARACHI

Holy Family Hospital
Karachi, Pakistan

July incidentally was a very important Mohammedan month, called Ramazan. The four weeks preceding it are fast days. This fast is called the Roza. They may not eat or drink from sun-up to sundown. This is very hard, particularly in such hot weather. Employees manage to work, but some of them look very weak. All restaurants close during the day. Loud whistles blow at five in the morning and eight in the evening. Our patients are exempted by the Law of Shariat which dispenses the sick and the infirm from the law of fasting. The water supply, too, is affected by Ramazan. It is only turned on from 3:30 to 5:30 in the morning and from 5:30 to 7:30 in the evening.

Our own water supply has been less of a problem these last few weeks. Up to now we would suffer a water shortage frequently and usually at embarrassing times, for instance, when the doctors were going to scrub for an operation. Sister Dolores worked on this problem for months. She hired and fired seven pump-wallahs, but one by one they would leave in despair because they spent so many hours pumping and yet

DEPARTURES FOR THE MISSIONS

Left to right:

Sr. M. Benedict Young, M. D.
Philadelphia, Pa.
to Holy Family Hospital,
Mymensingh, Pakistan

Sr. M. David Gearhard, B. S. N.
Milwaukee, Wis.
to Holy Family Hospital,
Mandar, India

Sr. M. John Zweber, M. T.
Hastings, Minn.
to Holy Family Hospital,
Rawalpindi, Pakistan

Sr. M. Raymond Baker
Brooklyn, N. Y.
to Holy Family Hospital,
Karachi, Pakistan

Sr. M. John sailed on July 23 to England. She will be joined by Sister M. Raymond in October, and they will proceed to Pakistan. Sister M. Benedict and Sister M. David left by plane on October 6.



the tanks would never fill up. I can still hear Sister calling out to the pump wallah early every morning, "Pani ne ata." ("The water is not coming.") At long last the mali (gardener) announced that he wanted the job. He had quietly observed the whole situation. He knew just what taps the dhobis (laundrymen) were turning off so that they could use our water and wouldn't have to pump their own. Now we have plenty of water, but the mali can't risk living on the compound because his life wouldn't be safe since he has so effectively cramped the dhobis' style.

Our hospital may be small, but we certainly manage to have a variety of patients. A lieutenant-colonel, attached to the American Embassy next door has been here for about ten days. Yesterday the niece of the Nawab of Jugganar was admitted. There are about half a dozen Muslim patients, one Parsee, one Anglo-Indian — three English and the rest are Goans.

Sister M. Regina



JUST A REMINDER . . .

Christmas is coming

Why not give a subscription to "The Medical Missionary" to your friends? \$1.00 for one year \$5.00 for six years.

Name

Address

City Zone State

Make checks payable to "The Medical Missionary." A card will be sent to your friends announcing your gift.

MISSION SUNDAY

Don't forget — give your whole hearted spiritual and financial support to the missions on October 24.

FIRST MASS IN MYMENSINGH

The Feast of Our Lady's Nativity marked the opening of a new mission in Mymensingh, Bengal, East Pakistan, not very far from Dacca. This new Holy Family Hospital will serve an area whose population numbers over six million aborigines and Garos.

HOLLAND

An Imstenrade, Heerlen, September 8 was the day for Reception and Profession ceremonies.

The Medical Mission Sisters Lose a Friend

Mrs. Marie K. Burdick, of Brooklyn, for many years in charge of publicity in the national office of the Society for the Propagation of the Faith in New York, died on July 29. Both in her official position and in her private life, she did all in her power to promote mission interest and support. In 1925, she was awarded the Papal Medal, "Pro Ecclesia et Pro Pontifice" in recognition of her work. The Medical Mission Sisters join with the many friends of Mrs. Burdick in praying for the repose of her soul.

R. I. P.

*Very Rev. Ignatius Lissner, S.M.A.
Teaneck, N. J.*

*Mrs. Blanche F. Wendell
Washington, D. C.*

*Mr. Otto T. Hettle
Washington, D. C.*

*Msgr. H. A. Poels
Heerlen, Holland*

St. Joseph's List

PINDI

Four walls and a roof do not make a hospital. Each room will require: \$15 for wiring and lighting fixtures; \$35 for flooring, \$5 for windows—just for the finishing touches.

AFRICA

It gets pretty hot so close to the Equator. An ice box (\$200) will keep precious medicine from spoiling.

MANDAR

A roof over their heads—that's what the Sisters in Mandar need since the last wind storm. \$100 will do the job.

PATNA

Bricks at one cent each — not more than a million

KARACHI

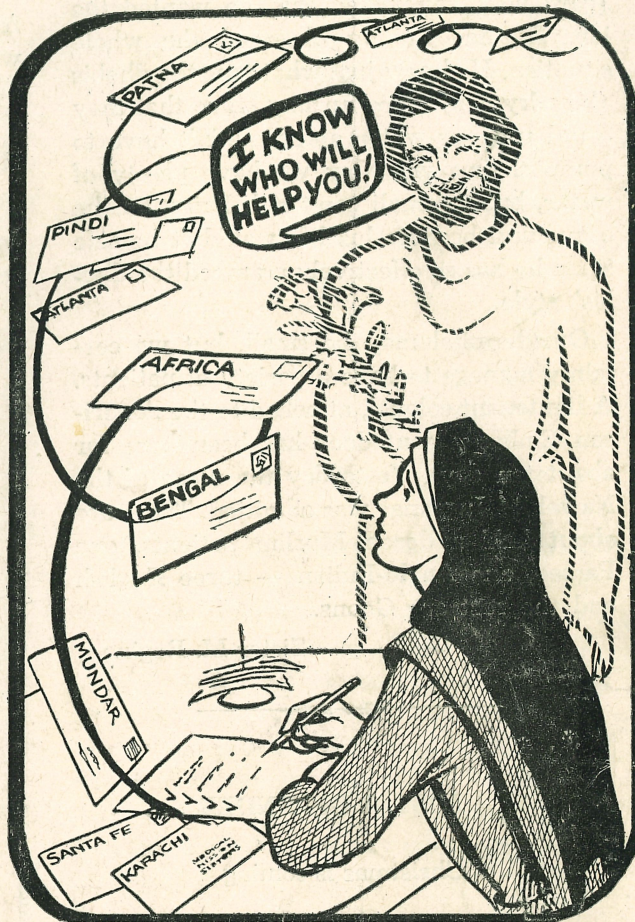
A portable typewriter would speed up work—\$79

BENGAL

The chapel still needs: 3 altar cloths at \$10 each, and a Benediction cope \$35

All the Missions:

Magazines subscriptions will give missionaries many a happy hour



MOTHER ANNA DENGEL, M. D.

Medical Mission Sisters

8400 Pine Road

Fox Chase, Phila. 11, Pa.

Dear Mother Dengel:

Here is \$.....

for

() Pindi () Africa () Mandar

() Patna () Karachi () Bengal

() All the Missions

Sincerely,

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